BEST AVAIL # SLE COFT											
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000											
CLAIMS AS FILED - PART I (Column 1) (Column 2)						_	SMALL EN		OR	OTHER SMALL E	
TOTAL CLAIMS		25				1	RATE	FEE		RATE	FEE
FOR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS		2 9 minus 20=		• 5			X\$ 9=		OR	X\$18=	90
INDEPENDENT CLAIMS		.e. 8 aurimus 3 =		•			X40=		OR	X80=	
MULTIPLE DEPENDE	RESENT					.405			+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							+135=		OR	TOTAL	200
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL E	NTITY	OR OR	OTHER SMALL E	THAN
E	CLAIMS REMAINING AFTER MENDMENT		PREVI	REST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	26	Minus .	- 2	5	-		X\$ 9=		OR	X\$18=	
Independent •	3	Minus .	••• 7	<u> </u>	- Ø		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=	C 1 3 7 7	OR	+270=	
							TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)											
8	CLAIMS REMAINING AFTER AMENDMENT		HIG NUX PREVI	HEST ABER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	20	Minus	:	7	- Ø ,		X\$ 9=		OR	X\$18=	
Independent •	3	Minus	eee ENDEN	3 TCI AIM	-8	-	X40=		ОЯ	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						_	+135=		OR	+270=	
							TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
03-31-0 (Column 2) (Column 3)											
TI C	CLAIMS REMAINING AFTER AMENOMENT		NUI PREV	HESY MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	20	Minus	•• 2	26	.0		X\$ 9=		OR	X\$18=	ï
Independent •	3	Minus	100	3	1-62	4	X40=		OR	X80=	
FIRST PRESENTATION OF MOLTIFLE DEFENDENT GENERAL						J	+135=		OR	+270=	
"If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3." ADDIT. FEE OR ADDIT. FEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the Notice manber found in the appropriate box in column 1.											

FORM PTO-675

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